



BOARD OF EXAMINERS FOR ALCOHOL, DRUG and GAMBLING COUNSELORS

REQUEST FOR APPLICATION FOR ALCOHOL AND DRUG ABUSE COUNSELORS

Please print or type the following information:

NAME		
HOME ADDRESS		
CITY	STATE	ZIP
TELEPHONE HOME		
BUSINESS NAME AND ADDRESS		
BUSINESS TELEPHONE		
SUPERVISORS NAME		
APPLICANT'S SOCIAL SECURITY NUMBER		

Please send me an application packet for certification/licensure as an alcohol and drug abuse counselor:

___ *Certification - Requires you have completed a Bachelors degree in an appropriate social science field and **have already completed 4,000 hours of practical experience in alcohol & drug abuse counseling.**

___ *Licensure – Requires you have completed a graduate degree in an appropriate social science field and **have already completed 4,000 hours of approved experience in alcohol and drug abuse counseling.**

___ Intern - Requires you have a **minimum** of a GED or High School Diploma and registration in an appropriate social science field in an approved college or provide the Board with a transcript from the registrar's office showing the completion of an appropriate degree from an accredited college or university.

- *** Please refer to the information recap for the exceptions regarding required practical experience.**

A nonrefundable money order for \$165.00 made out to the Board of Examiners must accompany this Request for Application for an Alcohol and Drug Abuse Counselor. ALL FEES ARE NONREFUNDABLE.

TYPES OF FEES	INTERN CERTIFICATION	CERTIFICATION OR LICENSURE
REQUEST FOR APPLICATION FINGERPRINTS	\$165.00 DUE WITH THIS REQUEST	\$165.00 DUE WITH THIS REQUEST
PROCESSING – Charged on all Applications	\$60.00 DUE WHEN APPLICATION SUBMITTED	\$60.00 DUE WHEN APPLICATION SUBMITTED
TESTING LEVEL II		\$215.00 DUE WITH APPLICATION & PER EVERY OTHER TEST TAKEN
TESTING MAC LEVEL		\$235.00 DUE WITH APPLICATION & PER EVERY OTHER TEST TAKEN
PROVISIONAL CERTIFICATE		\$125.00 DUE WITH APPLICATION IF QUALIFIED TO TEST & YOU WISH TO WORK IN THE FIELD & ARE NOT ALREADY AN INTERN
WAIVER OF EXAMINATION		\$165.00 DUE WITH THIS REQUEST

Please note: All applicants will be required to provide the Board with any and all information concerning any arrests, convictions, indictments, suspensions or revocations. If you have any convictions, arrests or etc. you **cannot** do substance abuse counseling until approved by the Board. An individual on parole or probation will not be considered for certification or licensure until such time as they have finished and have been off parole or probation for a minimum of two-years.

REQUESTS GO TO: BOARD OF EXAMINERS FOR ALCOHOL, DRUG AND GAMBLING COUNSELORS

625 FAIRVIEW RD SUITE 124
CARSON CITY NV 89701
775-884-8922

I hereby request the certification/registration packet as indicated above.

Signature _____

Date: _____

Training Materials: "The Basics of Addiction Counseling Independent Study Guide" is available from the board – cost is \$85.00.

Note: THE APPLICATION PACKET **MAY NOT** BE DUPLICATED. THE APPLICATION IS VALID FOR A PERIOD OF 12 MONTHS FROM THE DATE OF RECEIPT AND CAN ONLY BE USED BY THE INDIVIDUAL REQUESTING THE APPLICATION